## PART B - FEE(S) TRANSMITTAL

Complete and Shid this form, together with applicable fee(s), to: Mail

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MARSTELLER & ASSOCIATES, P.C. PO BOX 803302 DALLAS, TX 75380-3302

09/03/2004 WASFAW2 00000158 10064588

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Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail States [FEE] address above, or being facsimile transmitted to the USPTO (2013) 746-4100, on the day indicated below:

ransmitted to the USP10 (703) 740-4000, on the date mo	icated below.
Thomas F. Marsteller, Jr.	(Depositor's name)
Thomas & Maistellah	(Signatoro)
30 Aug 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/064,588	07/29/2002	Zhonglin Wo	000115-210	5119

TITLE OF INVENTION: LEAKAGE FREE CERAMIC FILMS FOR POROUS SURFACES

L	APPLN, TYPE	SMALL ENTITY	ISSUE F	56 	PUBLICATION PEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1330	)	\$300	\$1630	11/08/2004
	EXAL	diner.	ART IN	IT	CLASS-SUBCLASS	] .	
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1	FR 1.363).	e address or indication of "F	•	(1) the :	rinting on the patent front page, I	. Mareta	eller & Associates, P.C
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		or agents OR, alternatively.  (2) the name of a single firm (having as a member a		a member a 2			
	O "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.	ion (or "Fee Address" Indica or more recent) attached. Us	tion form e of a Customer	registere 2 registe	ed anomey or agent) and the nan red patent attorneys or agents. It o name will be printed.	nes of up to	

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

300.00 dp

01 FC:1504

Carleton Life Support Systems, Inc.

Orchard Park, NY

15\01\5004 KbINKNEA 00000005 10004288

4a. The following fee(s) me enclosed:	4h, Payment of Fee(s):
. Missue Fee	(2) A check in the amount of the fre(s) is euclosed.
Publication Fee (No small entity discount permitted)	Payment by credit card. Form PTO-2038 is strached.
C) Advance Order - # of Copies	U The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Depusit Account Number(cuclose an extra copy of this form).
5. Change in Entity Status (from status indicated above)	
Q a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	Ci b. Applicant is not claiming SMALL ENTITY status, Sec, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

This collection of information is required by 37 CFR [31]. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR [1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the annum of time you require to complete this form antitor suggestions for reducing this bunkles, should be scot to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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